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<b>CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)</b>			<b>Docket No.</b> 08CN8849-4
Applicant(s): Adeyinka Adedeji			
<b>Serial No.</b> 10/063,365	<b>Filing Date</b> April 16, 2002	<b>Examiner</b> Short	<b>Group Art Unit</b> 1712
Invention: High Flow Polyphenylene Ether Formulations with Dendritic Polymers			
<p>I hereby certify that this <u>Amendment (14 pgs.), Terminal Discl. (1 pg.), Transmittals, Cert. of Facsimile</u> (Identify type of correspondence)</p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9310</u>)</p> <p>on <u>June 11, 2003</u> (Date)</p> <p><u>Connie Wussow</u> (Typed or Printed Name of Person Signing Certificate)</p> <p><u>C. Wussow</u> (Signature)</p>			
Note: Each paper must have its own certificate of mailing.			

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<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>			Docket No. 08CN8849-4		
Applicant(s): Adeyinka Adedeji					
Serial No. 10/063,365	Filing Date April 16, 2002	Examiner Short, Patricia A.	Group Art Unit 1712		
Invention: High Flow Polyphenylene Ether Formulations with Dendritic Polymers					
<b>TO THE COMMISSIONER FOR PATENTS:</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	36 -	36 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	2 -	2 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<div style="display: flex; justify-content: space-between;"><div><p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p><p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____</p><p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p><p><input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>07-0862</b></p><p><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p><p><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</p></div><div style="text-align: right;"><p>Dated: June 11, 2003</p></div></div> <div style="margin-top: 20px;"> <i>Signature</i></div> <div style="margin-top: 10px;"><p><b>Leah M. Reimer</b> Registration No. 39,341 Customer No. 23413</p></div>					
<div style="border: 1px solid black; padding: 5px;"><p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p><p style="text-align: center;"><i>Signature of Person Mailing Correspondence</i></p><p style="text-align: center;"><b>VIA FACSIMILE</b></p><p style="text-align: center;"><i>Typed or Printed Name of Person Mailing Correspondence</i></p></div>					
CC:					